



OCT 12 2005 13:44

BC IP DIVISION

5136261355 P.02/03

## PART B - FEE(S) TRANSMITTAL

OCT 12 2005

Complete and send this form, together with applicable fee(s), to: **Mail Stop ISSUE FEE**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**  
**or Fax (571) 273-2885**

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

27752 7500 07/13/2005

**THE PROCTER & GAMBLE COMPANY**  
**INTELLECTUAL PROPERTY DIVISION**  
**WINTON HILL TECHNICAL CENTER - BOX 161**  
**6110 CENTER HILL AVENUE**  
**CINCINNATI, OH 45224**

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

**Certificate of Mailing or Transmission**  
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

LINDA M. SIVIK	(Depositor's name)
<i>Linda M. Sivik</i>	(Signature)
10/12/2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/764,561	01/17/2001	Robert Wayne Glenn JR.	8386	6898

TITLE OF INVENTION: DELIVERY OF REACTIVE AGENTS VIA SELF EMULSIFICATION FOR USE IN SHELF-STABLE PRODUCTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	10/13/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
SHEIKH, HUMERA N	1615	424-401000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.36(j)).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	<u>1 LINDA M. SIVIK</u>

3. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev. 03-02 or more recent) attached. Use of a Customer Number is required.	<u>2 TARA M. ROSNELL</u>
---	--------------------------

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the assignment 09/764,561 filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE	(B) RESIDENCE: (CITY and STATE OR COUNTRY) 400.00 DA 504 300.00 DA 1001 6.00 DA
10/12/2005 CNGUYEN1 00000157 09764561	

01 FE-1501 1400.00 DA  
Please check the appropriate residence category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

02 FE-1501 300.00 DA  
03 FE-1501 200.00 DA

4b. Payment of Fee(s):

<input type="checkbox"/> A check in the amount of the fee(s) is enclosed.
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.
<input checked="" type="checkbox"/> The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number <u>16-2480</u> (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(e)(2).

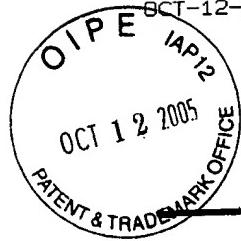
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.  
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*Linda M. Sivik*Date 10/12/05Typed or printed name LINDA M. SIVIKRegistration No. 44,982

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which it file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



OCT-12-2005 13:44

BC IP DIVISION

5136261355 P.01/03

# Facsimile Cover Sheet

THE PROCTER & GAMBLE COMPANY  
SHARON WOODS TECHNICAL CENTER  
11511 REED HARTMAN HIGHWAY  
CINCINNATI, OH 45241-2422

## IMPORTANT CONFIDENTIALITY NOTICE

The documents accompanying this telecopy transmission contain confidential information belonging to the sender which is legally protected. The information is intended only for the use of the individual or entity named below. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or the taking of any action in reliance on the contents of this telecopied information is strictly prohibited. If you have received this telecopy in error, please immediately notify us by telephone (collect) to arrange for the return of the telecopies documents to us.

**To:** Mail Stop Issue Fee  
**Company:** USPTO  
**Phone:** 571-272-4200  
**Fax:** 571-273-2885

**From:** Linda M. Sivik  
**Company:** The Procter & Gamble Company  
**Phone:** (513) 626-4122  
**Fax:** (513) 626-1355

**Date:** 10/12/05

**Pages including this  
cover page:** 3

This facsimile was transmitted via Panafax UF-770 connected to line 513-626-1355. If a problem in document transmission or document reception occurs, please contact Gayle Memory at 513-626-1679 or the sender.

## **Comments:**

P&G Docket No. 8386  
Serial No.: 09/764,561  
Filing Date: 01/17/2001  
Conf. No: 6898

## Attachments:

- Issue Fee Transmittal
- Fee Address Indication Form